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* APPLICATION AS FILED - PART I (Column 1) (Column 2)			olumn 2)-	small entity		OR OTHER THAN SMALL ENTITY		
FOR	NUMBER FILE) NUME	SER EXIRA	RATE (S)	FEE (1)		RATE (1)	FEE (1)
SICFEE CFR & 18161 [b] a [c]]	HVA :		NIA	NVA .	150.00		N/A	300.00
ARCH FEE CFR 1 16(4, 14, or (m)	N/A		N/A .	N/A	\$250	1 :	· N/A	\$600
AMINATION FEE (NA CFR) 160, U) O (U)		·	N/A	NA	\$100		· N/A	-\$200
TAL CLAMAS .		0		X\$ 25	7300	. "		1.00
DEPENDENT CLAIMS				X100	-;	OR	X\$50 .	ļ
(If the specification and drawings exceed 100			expect 100	7100		·	X200	
sheets of paper, the application size fee due to \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1(16(a).			ize fee due 'esch wreof, See		·•			
UETIPLE DEPENDENT CLAIM PRESENT DT CFR 1 16(1)				. +180=		·	4360-	l
I the difference in column 1 is less than zero, enter "O" in column 2.				TOTAL			TOTAL .	
CLAIMS H		(Column 2) HIGHEST NUMBER	(Column 1): PRESENT	PRESENT RATE (1) ADDI.		OR	OTHER SMALL I	
AME	HOMENT	PREVIOUSLY PAID FOR	EXTRA		FEE (S)			TIONAL FEE (\$)
Exera Lieu	(A Minus	20		X\$.25 .		OR .	X\$50 .	1
encia riene	: Minus	3	•••	X100 -	_ / _	OR	X200 .	7
AMENDMENT PAID FOR Total STEPA LINE WITH STATE AND STAT					_/_			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (\$7 OFR 1.16(0))				+180 =		OR L	4360=	<u>· </u>
13107	1,2,	. (Column 2)	(Column 8)	ADDITEE	4		TOTAL ADD'L FEE	1
REM	AIMS AINING TER. IOMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (I)	ADDI- TIONAL	٠.٢	RATE (S)	ADDI- TIONAL
Total or cracu	9 Minus	- 0	•.0	X\$ 25 .	FEE (S)	_ f;	K\$50 .	FEE(S)
Independent DIT CFR & Hand	Minus ·	- 2	-	X100			(200	1
Application Size Fee (3	7 CFR 1.16(s))					OR 1	200	
FIRST PRESENTATION OF MATIPLE DEPENDENT CLAIM (37 CFR 1.14(1))				+180a			+360z	1
TOT PRESENTATION O	THE COUNTY			1 1004 1		OR I	1000E]	/ l

ell the entry in column 1 is less than the entry in column 2, write "V' in column 3.

"If the Tighest Number Previously Paid For' th THIS SPACE is less than 20, enter "20".

"If the Tighest Number Previously Paid For' th THIS SPACE is less than 3, enter "2".

"If the Tighest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the 10 to process) an application. Confidentially is governed by 35 U.S.O. 122 and 37 OFR 1.14. This collection is estimated to take 12 minutes to complete. Iting gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending spon the individual case. Any comments a amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief, Information Officer, U.S. Patent Information Officer, U.S. Patent Information Titles (U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, OO NOT SEND FEES OR COMPLETED FORMS TO THIS 1256. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1460,